

She brings a unique set of skills to the table—something that has served the Commission and our country well.

I continue to have ongoing discussions with our friend, the chairman of the committee, Senator JOHN BARRASSO, about the strong interest I and our minority members of the committee have with ensuring parity, as the Senate looks to confirm other nominees to the NRC. This is in order to ensure that we have a balance of Democratic and Republican members on the Commission for years to come. It continues to be a priority for me and our Democratic colleagues.

At this time, I support moving Chairman Svinicki through the confirmation process. I do so out of respect for her long service to the NRC and for the need to ensure certainty and predictability within the NRC and its leadership. I hope my colleagues will join me in supporting her nomination.

Mr. President, as to this particular nominee, not everybody on the committee or probably in the Senate will support the nomination of Kristine Svinicki. They could have held her up. No one has, and she has moved through our committee expeditiously. She, in my view, should have moved through expeditiously and will be coming before us for an up-or-down vote in a few minutes.

HEALTHCARE LEGISLATION

Mr. President, I want to suggest, as we approach our business later this week with respect to healthcare legislation, that maybe the way we have handled this nomination might be a little bit of a model for the way we can actually work together.

We need to. People in this country say to me all the time and people in my State say to me all the time: Just work together. Get something done.

I know the Presiding Officer and the Senator from West Virginia, who has just entered the Chamber, want to work that way, too, and so do I. What I think we ought to be doing on healthcare in this body is to look at the ACA and study it up and down. God knows we had enough hearings, roundtables, opportunities to debate it, vote for it, and amend it—over 80, I think, or maybe over 400 amendments, all told, and 80-some days of working on it in 2009.

Rather than have legislation that just Democrats or just Republicans vote to put on the table and to try to push through here on Thursday, my hope is that we will hit the pause button. My hope is that we will hit the pause button, and we will focus—Democrats and Republicans—on trying to figure out what in the Affordable Care Act needs to be fixed and fix it, and figure out what needs to be maintained and preserved and preserve it. That is what I think we should do.

Lo and behold, if we were to do those things, I think we would end up with a better healthcare system with better healthcare coverage and maybe actually make true of the word of the Pres-

idential nominee, Donald Trump, who said he favored healthcare legislation that would actually cover everybody and get better results for less money. That is not a bad goal for us to shoot for. What I have laid out here just very briefly is this: Figure out what needs to be fixed in the Affordable Care Act and fix it, figure out what needs to be preserved and preserve it, and do it not just as Democrats or Republicans, but do it together. I think if we would do that, in the words of Mark Twain, we would confound our enemies and amaze our friends.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. MANCHIN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

All time has expired.

The question is, Will the Senate advise and consent to the Svinicki nomination?

Mr. MANCHIN. I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

Mr. CORNYN. The following Senators are necessarily absent: the Senator from Arizona (Mr. FLAKE), the Senator from Georgia (Mr. ISAKSON), and the Senator from Alabama (Mr. STRANGE).

The PRESIDING OFFICER (Mr. LANKFORD). Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 88, nays 9, as follows:

(Rollcall Vote No. 154 Ex.)

YEAS—88

Alexander	Fischer	Paul
Baldwin	Franken	Perdue
Barrasso	Gardner	Peters
Bennet	Graham	Portman
Blumenthal	Grassley	Reed
Blunt	Hassan	Risch
Boozman	Hatch	Roberts
Brown	Heinrich	Rounds
Burr	Heitkamp	Rubio
Cantwell	Hirono	Sasse
Capito	Hoeven	Schatz
Cardin	Inhofe	Schumer
Carper	Johnson	Scott
Casey	Kaine	Shaheen
Cassidy	Kennedy	Shelby
Cochran	King	Stabenow
Collins	Klobuchar	Sullivan
Coons	Lankford	Tester
Corker	Leahy	Thune
Cornyn	Lee	Tillis
Cotton	Manchin	Toomey
Crapo	McCain	Udall
Cruz	McCaskill	Van Hollen
Daines	McConnell	Warner
Donnelly	Menendez	Whitehouse
Duckworth	Moran	Wicker
Durbin	Murkowski	Wyden
Enzi	Murphy	Young
Ernst	Murray	
Feinstein	Nelson	

NAYS—9

Booker	Harris	Merkley
Cortez Masto	Heller	Sanders
Gillibrand	Markey	Warren

NOT VOTING—3

Flake Isakson Strange

The nomination was confirmed.

The PRESIDING OFFICER. The majority leader.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the motion to reconsider with respect to the Svinicki nomination be considered made and laid upon the table and the President be immediately notified of the Senate's action.

The PRESIDING OFFICER. Is there objection?

Without objection, it is so ordered.

LEGISLATIVE SESSION

MORNING BUSINESS

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Senate be in a period of morning business for debate only and with Senators permitted to speak therein.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Hawaii.

HEALTHCARE LEGISLATION

Ms. HIRONO. Mr. President, we are all one diagnosis away from having a serious illness. Lots of us believe that getting a serious illness is something that happens to other people. I was one of them.

My moment of reckoning came 2 months ago. During a routine physical, my doctor told me I have kidney cancer. It is a moment everyone dreads. Thankfully, I had health insurance. I was able to sit down with my doctors and decide how I would fight my cancer, not how I would pay for treatment.

No one should have to worry about whether they can afford the healthcare that one day might save their life. Healthcare is personal, and it is a right, not a privilege reserved only for those who can afford it. It is why we are fighting so hard against TrumpCare.

Thirteen of our male colleagues spent weeks sequestered away, literally plotting how to deny millions of people in our country the healthcare they deserve. They spent these weeks figuring out how to squeeze as much as they could out of the poorest, sickest, and oldest members of our society so they could give the richest people in our country a huge tax cut. This is not a healthcare bill. This is a tax cut for the rich bill.

Last week, the majority whip looked the American people in the eye from his desk and accused us of denouncing TrumpCare before we had a chance to read it. Well, read it we did, and it is as bad as we thought.

The Congressional Budget Office is estimating that 22 million people will lose their insurance under TrumpCare. Its draconian cuts to Medicaid would have a devastating impact on our seniors—our kupuna, as we refer to them

in Hawaii—who depend on the program for long-term nursing care. It imposes an age tax on people 50 to 64 that allows insurance companies to charge them five times more for insurance. It fulfills the Republican Party's cherished goal of defunding Planned Parenthood. It undermines protections for Americans living with serious and chronic diseases who could face the reimposition of yearly and lifetime caps on their care.

For millions of people in our country, TrumpCare is not some abstract proposal that has no relevance to their lives. Last week, Senator MURRAY, Senator VAN HOLLEN, and I joined three advocates—Ian, Marques, and Jill—who told us their stories about how TrumpCare would impact them.

Ian grew up in Fond du Lac, WI. During his sophomore year in high school, Ian discovered he had bone cancer after suffering an injury playing football. He has been cancer-free for 6 years and is now pursuing a career in medical research, in large part, because of his experience in fighting this cancer. Although Ian has been cancer-free for some time now, he is very concerned about what TrumpCare could mean for him if his disease comes back. He has a preexisting condition.

Marques lives in Richmond, VA. He was diagnosed with multiple sclerosis when he was only 27 years old. He has three young daughters and faces a lifetime of extensive treatment for his disease. Because of the Affordable Care Act and the guarantee of coverage it affords every American, Marques did what he never thought he would be able to do with MS, he started his own business.

Jill is from Hillard, OH. Her daughter Alison was born with cystic fibrosis. Alison endured a lot at a very young age. When she was only 7, Alison had part of her lung removed because of the damage her disease caused. Because she has health insurance, which makes paying for expensive CF drugs more affordable, Alison is a happy teenager planning eagerly for her future. Jill made clear what would happen if TrumpCare passes: Alison's CF medication would become prohibitively expensive. Under TrumpCare, Jill would have to make decisions about which drugs she could afford for Alison, not which would work best to fight her disease.

Annual or lifetime limits on healthcare coverage will mean constant worry about paying for the life-saving care that Ian, Marques, Jill, and their families need—not starting a business, not living like a normal teenager or young adult with dreams for the future. They will spend practically every waking moment just worrying about how they are going to pay for the care they need to live.

TrumpCare would be a disaster for the American people, and we are going to fight against it tooth and nail, but I also want to be clear about what we are fighting for. We are fighting for universal healthcare that is a right,

and not a privilege, for every American.

Tomorrow, I am going in for surgery to remove the lesion I have on my rib, but I am going to be back as quickly as I can to keep up the fight against this mean, ugly bill. The stakes are too high to stay silent. We need everyone in this fight because we are all in it together.

Millions of people across the country are mobilizing against TrumpCare because healthcare is personal. I am encouraged that so many people have been calling all of us and making their voices heard. The majority leader and Donald Trump can try to jam this bill down our throats, but we aren't going to let them succeed, and we are going to hold them accountable.

The fight continues.

I yield the floor.

The PRESIDING OFFICER. The Democratic leader.

WISHING THE SENATOR FROM HAWAII WELL

Mr. SCHUMER. Mr. President, I just want to salute, on behalf of all of us in the Senate, our great, great Senator from Hawaii. Her courage, her strength, her conviction to help people who need help is just inspiring—that is the only word I could think of, “inspiring”—to every one of us.

We love you, MAZIE. We wish you well, and we can't wait for you to come back and rejoin the fight doubly invigorated.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oregon.

Mr. MERKLEY. Mr. President, I extend to my colleague from Hawaii every blessing for her successful health treatment. I know the thoughts and prayers of every Member of the Senate are with her tomorrow and beyond as she undertakes that healing path.

HEALTHCARE LEGISLATION

Mr. MERKLEY. Mr. President, I appreciate the comments of the Senator from Hawaii tonight. They are certainly very relevant to the issue of healthcare here in America because each of us hopes that if a loved one gets ill, they will have the peace of mind that they know they will be able to get the healthcare they need and they will not go bankrupt in the process. Yet here we are tonight debating a bill titled “Better Care Act.”

Better Care, has ever there been a bill in the history of the United States of America so more perversely named than this Better Care Act which strips care from 22 million Americans?

I was very struck by one equation of this bill; that is, that it provides to the richest 400 Americans \$33 billion over a 10-year period. That is enough to pay for healthcare under Medicaid for 700,000 individuals—700,000 individuals. It rips the healthcare away from them to give \$33 billion to the richest 400

families. That is obscene. That is certainly not better care.

It is hard for me to imagine that a single Member of this body would vote to proceed to this bill, but here we are. Until we get agreement that we are not going to proceed, we have to continue to carry on this fight.

We know that 15 million people, CBO estimates, will lose healthcare in the next 12 months. That is even worse than the House bill. Last week, I came to this floor to call the Senate draft mean and meaner. The House bill was mean. The Senate's is meaner. Now we have the CBO estimate that says, yes, it is worse. One million more people would lose healthcare in a short period of time.

Furthermore, the rate at which standard Medicaid is compressed—Medicaid, as it existed before ObamaCare, that rate has increased to further diminish healthcare, having nothing to do with ObamaCare, just to add to the cruelty of this bill. So millions lose, but we deliver billions of dollars to the richest Americans.

In my home State of Oregon, just the elimination of the expansion of Medicaid, the Oregon health plan—just that would eliminate 400,000 Oregonians off healthcare.

Imagine those individuals holding hands, 400,000 Oregonians, stretching from the Pacific Ocean to the State of Idaho. Anyone who has driven across Oregon would realize it is 400 miles across Oregon. If you are driving it, it is 7 hours of driving. For 7 hours, at 50 miles an hour, 60 miles an hour, you are passing a stream of people who would lose their healthcare just from the elimination of the expansion of Medicaid.

My colleagues across the aisle have crafted this so as to put it beyond the next Presidential election, beyond the 2018 election and beyond the 2020 election. Why? They are so terrified of the impact of this on the election they decided to postpone it until after 2018 and 2020, as if that makes it acceptable to rip healthcare from millions of people. That type of cynical, cynical act, purely political, is not going to be viewed well by the American public.

If you are so ashamed of this bill, if someone is so ashamed that they want to postpone the effects beyond the next Presidential election 3½ years from now, then maybe you should be so ashamed as not to vote to move to the bill here in the short term.

One of our colleagues across the aisle noted today: I can't imagine—not quite the exact word-for-word, but it is close. I can't imagine that anyone in America would have a chance to review this bill and truly understand it in time to proceed to it this week, including myself.

Well, that is certainly true. Has there ever been a case where a bill profoundly affecting so many has not had the benefit of committee deliberation here in the Senate? Are we a legislative body or are we a dictatorship where everything is done behind closed doors